

There is Nothing Like

CHURCH RETREAT 2010

LIVING PRAISE PRESBYTERIAN CHURCH

Mercure Johor Palm Resort & Golf, Johor Bahru

13 - 16 June 2010

The CHURCH!!



"...the Greatest is Love."
1 Cor 13:13

REGISTRANT INFORMATION (Please fill in capital letters)

Name (as in passport):		Gender: M / F	
Address:		(S)	
Contact No(s): (Mobile)	(Home)	Age:	
Passport No:	Place of Issue:	Nationality:	
Date of Issue: (DD / MM / YYYY)	Date of Expiry: (DD / MM / YYYY)	Date of Birth: (DD / MM / YYYY)	
Room Preference: <i>plse tick</i> <i>(subject to availability)</i>	Single \$S\$430/pax []	Triple - Student/NS \$S\$230/pax []	
	Twin \$S\$280/pax []	Child* w extra bed \$S\$180/pax []	
	Triple - Adult \$S\$270/pax []	Child* w/o extra bed \$S\$130/pax []	

FOR FAMILY (Please fill in capital letters)

* Child – Between 5 to 12 years of age as of 01 Jan 2010

Spouse (M / F)	Name: (as in passport)		Age:
	Passport No:	Place of Issue:	Nationality:
	Date of Issue: (DD / MM / YYYY)	Date of Expiry: (DD / MM / YYYY)	Date of Birth: (DD / MM / YYYY)
Child 1 * (M / F)	Name: (as in passport)		Age:
	Passport No:	Place of Issue:	Nationality:
	Date of Issue: (DD / MM / YYYY)	Date of Expiry: (DD / MM / YYYY)	Date of Birth: (DD / MM / YYYY)
Child 2 * (M / F)	Name: (as in passport)		Age:
	Passport No:	Place of Issue:	Nationality:
	Date of Issue: (DD / MM / YYYY)	Date of Expiry: (DD / MM / YYYY)	Date of Birth: (DD / MM / YYYY)
Child 3 * (M / F)	Name: (as in passport)		Age:
	Passport No:	Place of Issue:	Nationality:
	Date of Issue: (DD / MM / YYYY)	Date of Expiry: (DD / MM / YYYY)	Date of Birth: (DD / MM / YYYY)

PARENT'S/GUARDIAN'S CONSENT FOR REGISTRANT 18 AND BELOW

I hereby allow my child / ward to participate in the Church Retreat 2010 organized by Living Praise Presbyterian Church to be held at Mercure Johor Palm Resort & Golf, Johor Bahru, from 13-16 June 2010. I will not hold Living Praise Presbyterian Church responsible for any injuries or mishaps that may happen to child / ward due to his / her participation or any unforeseen circumstances.

Name (as in IC) : _____

Preferred Contact No: _____

Relationship: _____

Signature of Parent / Guardian

Date

SPECIAL REQUESTS

Room-mate:	Name 1:	(official use) Ref No: CC2010 /	Driving: Y / N
	Name 2:	(official use) Ref No: CC2010 /	Vehicle No:
Others:			

FOR OFFICIAL USE ONLY

Total Amount:	S\$	Remarks:	
Amount Paid:	S\$	(Cash / Cheque No.)	Date Received (DD / MM): / / 2010 Received By:
Balance Amount:	S\$	(Cash / Cheque No.)	Date Received (DD / MM): / / 2010 Received By:

Note: S\$50 per pax deposit is required upon submission of registration. This amount will **NOT** be refundable if withdrawal request is received **after 25 April 2010**. For payment by cheque, please make payable to **Living Praise Presbyterian Church**.